

STATE OF CALIFORNIA

CDC - 193 (1/88)

DEPARTMENT OF CORRECTIONS

FEB 12 2008

TRUST ACCOUNT WITHDRAWAL ORDER

2408

Date FEBRUARY 2 2008

COURT
CALIFORNIA

To: Warden

Approved

F. I. DB GUYMON X 4327

I hereby request that my Trust Account be charged \$ 5.00 for the purpose stated below and authorize the withdrawal of that sum from my account:

H-70449

NUMBER

State below the PURPOSE for which withdrawal is requested
(do not use this form for Canteen or Hobby purchase).

PURPOSE 5.00 COURT FILING FEE

CASE # CV08-0288

Johnny Placencia

NAME (Signature please, DO NOT PRINT)

PRINT PLAINLY BELOW name and address of person
to whom check is to be mailed.

NAME
ATTN: CLERK OF THE COURT CIVIL/DOCKET SECT.
ADDRESS

UNITED STATES DISTRICT COURT FOR THE
NORTHERN DISTRICT OF CALIFORNIA

450 GOLDEN STATE AVE. BOX 36060

SAN FRANCISCO, CALIFORNIA, 94102

PRINT YOUR FULL NAME HERE

JOHNNY PLACENCIA H-70449

UNITED STATES DISTRICT COURT
FOR THE NORTHERN DISTRICT OF CALIFORNIA

Dear Sir or Madam:

Your petition has been filed as civil case number **CV 08 0288**

✓ A filing fee of \$5.00 is now due. If you are unable to pay the entire filing fee at this time, you must sign and complete this court's Prisoner's In Forma Pauperis Application in its entirety. If the application is granted, you will not have to prepay the fee.

Your petition is deficient because you did not pay the filing fee and:

1. ✓ you did not file an In Forma Pauperis Application.
2. _____ the In Forma Pauperis Application you submitted is insufficient because:

_____ You did not use the correct form. You must submit this court's current Prisoner's In Forma Pauperis Application.

_____ Your In Forma Pauperis Application was not completed in its entirety.

_____ You did not sign your In Forma Pauperis Application.

_____ You did not submit a Certificate of Funds in Prisoner's Account completed and signed by an authorized officer at the prison.

_____ You did not attach a copy of your prisoner trust account statement showing transactions for the last six months.

_____ Other _____

Enclosed you will find this court's current Prisoner's In Forma Pauperis Application, which includes a Certificate of Funds in Prisoner's Account form, and a return envelope for your convenience.

Warning: YOU MUST RESPOND TO THIS NOTICE. If you do not respond within **THIRTY DAYS** from the filing date stamped above, your action will be **DISMISSED**, the file closed and the entire filing fee will become due immediately. Filing a Prisoner's In Forma Pauperis Application will allow the court to determine whether prepayment of the filing fee should be waived.

Sincerely,
RICHARD W. WIEKING, Clerk,

By _____
Deputy Clerk

JOHNNY PLACENCIA
C.T.F. GW-2060
P.O. Box 689
SOLICIDAD, CALIF.
93960-0689**BUSINESS REPLY MAIL**

FIRST-CLASS MAIL PERMIT NO. 12615 WASHINGTON DC

POSTAGE WILL BE PAID BY UNITED STATES COURTS

US DISTRICT COURT
450 GOLDEN GATE AVE
PO BOX 36060
SAN FRANCISCO CA 94102-9680

FFR - 8 2008

RECEIVEDRICHARD W. WIEKING
CLERK, U.S. DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

JF

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